## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	correspondence including d below or directed other	or transmitting the ISSU g the Patent, advance of crwise in Block 1, by (a	JE FEE and PUBLICATI rders and notification of n a) specifying a new corres	ON FEE (if requestion in the contract of the c	ired). Blocks I through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
	ENCE ADDRESS (Note: Use Blo	ck I for any change of address)	E papo	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	7590 09/12/ LECTRONICS L PROPERTY LAV REET	v ( oct ?	2 0 2006 State addr	Cerreby certify that the cs Postal Service versed to the Mai	tificate of Mailing or Trans	g deposited with the United st class mail in an envelope above, or being facsimile
972 E	ON NT 05452	THE STATE OF THE S		···		(Depositor's name)
ESSEX JUNCTI	ON, VI 05452	STEATE I	ADEM			(Signature)
					· · · · · · · · · · · · · · · · · · ·	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/709,519 05/11/2004		Manabu Saitoh		JP920030081US1 3518		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/12/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS			
HAN, YOUNGHUIE JESSICA		2838	323-299000			
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  XX "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Michael J. Lestrang  2			
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or type	x)		
					ice is identified below, the d 1996 MAHMED2 19901994	ocument has been filed for 090456 10709519
(A) NAME OF ASSIC		CC MACHINEC	(B) RESIDENCE: (CITY and STATE OR COUNTRY)  01 FC:1501 1400.00 DA  CORPORATION 02AFRMONK, NY300.00 DA  0504			
INIERNATI	ONAL BUSINE	33 MACHINES		37	_	
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual \(\Oldot\) Co	orporation or other private gr	oup entity U Government
4a. The following fee(s) a	41	b. Payment of Fee(s): (Plea	se first reapply a	ny previously paid issue fee	shown above)	
(XX Issue Fee			A check is enclosed.			
_	o small entity discount per of Copies		Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 090456 (enclose an extra copy of this form).			
	s SMALL ENTITY status	s. Sec 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Stat	ired) will not be accepte es Patent and Trademark	d from anyone other than the Office.	he applicant; a reg	istered attorney or agent; or t	he assignee or other party in
Authorized Signature	Will aday VIII	Re Songe			10/12/2006	
Typed or printed name	Michael J.			<del>-</del>	No. 53207	
This collection of inform an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 Chiality is governed by 35 application form to the ons for reducing this burn	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the process of the company of the	on is required to obtain or real. 1.14. This collection is estable depending upon the individual COMPLETED FORMS.	retain a benefit by the imated to take 12 ridual case. Any coor, U.S. Patent and	the public which is to file (an minutes to complete, including the amount of the trademark Office, U.S. Deposition of the commissioner of the public of the commissioner of the public o	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.